**Patent** Attorney Docket No. 019952-167

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

MAIL STOP ISSUE FEE

RECEIVED CENTRAL FAX CENTER

JUN 1 6 2005

In re Patent Application of

Katsuhiro Shirakawa et al.

Commissioner for Patents

Filing Date:

Application No.: 09/937,062 January 29, 2002 Group Art Unit: 3762

Examiner: MARK BOCKELMAN

Confirmation No.: 6296

Title: IMPLANTABLE ELECTRODE LEAD AND IMPLANTABLE MEDICAL INSTRUMENT USING THE

IMPLANTABLE ELECTRODE LEAD

## AMENDMENT/REPLY TRANSMITTAL LETTER

	D. Box 1450 xandria, VA 22313-1450				
Sir	:				
En	closed is a reply for the above-identified patent application.				
	A Petition for Extension of Time is also enclosed.				
	Terminal Disclaimer(s) and the \$65.00 (2814) \$130.00 (1814) fee per Disclaimer due under 37 C.F.R. § 1.20(d) are also enclosed.				
	Also enclosed is/are				
	Small entity status is hereby claimed.				
	Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the \$395.00 (2801) \$790.00 (1801) fee due under 37 C.F.R. § 1.17(e).				
	Applicant(s) requests that any previously unentered after final amendments <u>not</u> be entered. Continued examination is requested based on the enclosed documents identified above.				
	Applicant(s) previously submitted				
	on for which continued examination is requested.				
	Applicant(s) requests suspension of action by the Office until at least which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.				
	A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (1809/2809) is also enclosed.				
DI	IRNE TYPE				

AMENDMENT/REPLY TRANSMITTAL LETTER

Page 1 of 2 (12/04) Total Claim Amendment Fee

\$ 0.00

\$ 0.00

\$ 0.00

				Attorney Docket No. Application	019952-167 n No. <u>09/937,062</u>
No additional cla	im fee is requ	ired.			
An additional cla	im fee is requ	ired, and is calcula	ited as shown bel	ow.	
		AMEND	ED CLAIMS		
	No. of Claims	Highest No. of Claims Previously Paid For	Extra Claims	Rate	Additional Fee
Total Claims		MINUS 20 =	0	× \$50.00 (1202)=	\$ 0.00
Independent Claims		MINUS 3 =	O	x \$200.00(1201)=	\$ 0.00
lf Amendment adds n	rultiple depen	dent claims, add \$	360.00 (1203)		·

Small Entity Status claimed - subtract 50% of Total Claim Amendment Fee TOTAL ADDITIONAL CLAIM FEE DUE FOR THIS AMENDMENT A check in the amount of is enclosed for the fee due. to Deposit Account No. 02-4800. ☐ Charge to credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

P.O. Box 1404 Alexandria, Virginia 22313-1404 (703) 836-6620

Veri B. Me (off (Rn. 53, 297)

Registration No. 32,814

I hereby certify that this correspondence is being submitted by facsimile transmission to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22315-1450, to the following facsimile number:

Facelmile Number: 703/872

Kevin . McGoff Typed Name:

BURNS DOANE BLIRING DOANE SWECKER & MATHIS LLP INTELLECTUAL PROPERTY LAW

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Patent Attorney's Docket No. <u>019952-167</u>

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For: IMPLANTABLE ELECTRODE LEAD AND IMPLANTABLE MEDICAL INSTRUMENT USING THE IMPLANTABLE ELECTRODE LEAD	

## RESPONSE TO NOTICE REGARDING DRAWINGS

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

In response to the Notice Regarding Drawings dated April 22, 2005, submitted herewith is a replacement sheet including an amended Fig. 11.